

M0450030  
Leslie

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FORM MR-AR  
(Revised 11/2008)

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS AND MINING  
1594 West North Temple - Suite 1210  
Box 145801  
Salt Lake City, Utah 84114-5801  
Telephone: (801) 538-5291  
Fax: (801) 359-3940

**LARGE MINING OPERATIONS 2008 PROGRESS REPORT**  
**January 1, 2008 to December 31, 2008**

The information required in this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, and the rules as under the Utah Minerals Regulatory Program.

1. Mine Permit Number: M045030
2. Mine Name: Cargill Salt
3. Name of Operator/Permittee: Cargill Incorporated, Salt Business Unit  
Note: If Operator's address, company representative or phone number have changed, please provide a replacement page for the Notice of Intention.
4. Mine Location: 15100 West Rowley Road Grantsville UT, 84029
5. Report the gross amount of ore mined and waste moved, and the disposition of the materials (onsite stockpiles, sold, waste pile, regraded, etc.):

Gross Ore Mined 720000 Tons, or \_\_\_\_\_ yd<sup>3</sup>  
Waste Material Moved 0 Tons, or \_\_\_\_\_ yd<sup>3</sup>  
New Disturbance 0 Acres during 2008  
Area Reclaimed 0.420 Acres during 2008  
Total Disturbed Area 64 Acres\*

\*Total mine disturbance from the beginning of mining operations through the end of 2008.

Was the ore shipped off site? If not, where is the ore located? YES

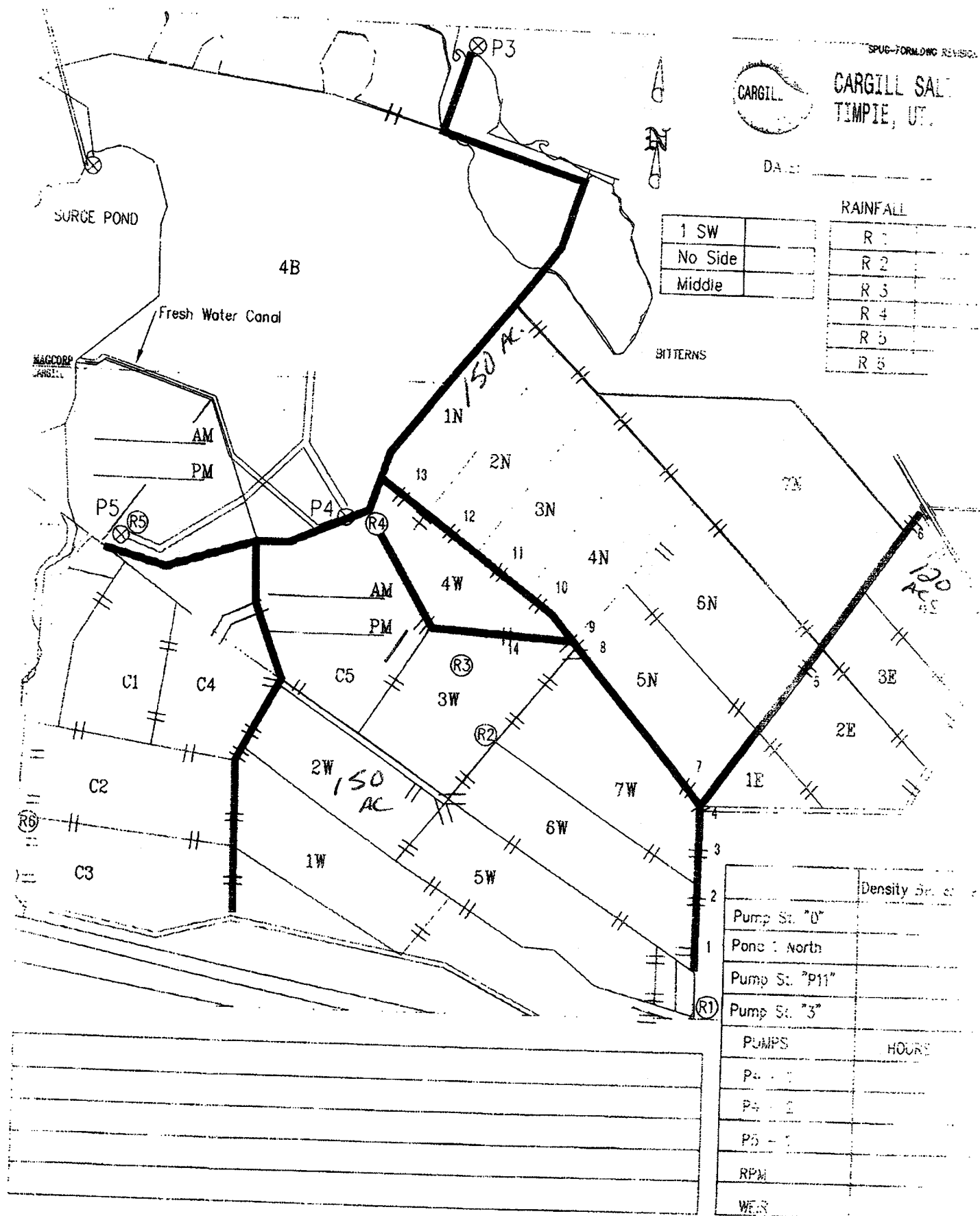
Where is the waste located? NA

6. Briefly describe the reclamation work performed during the past year. A map showing reclaimed areas and dates is suggested. (Submit form MR-SITE for an application for full or partial bond/site release).  
NO AREA HAS BEEN RECLAIMED
7. Include an updated map depicting surface disturbance and reclamation performed during the year, prepared in accordance with Rule R647-4-105.

I hereby certify, under penalties of law, the information provided in this report is true and correct to the best of my knowledge and belief.

Name (Typed or Print): JASON STEVENS  
Title of Operator: PLANT MANAGER  
Signature of Operator: [Signature]  
Date: 2/19/09

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*Fax Cover Sheet*

To	From
Company	Unit
Division of oil, gas, & mining	Name
Fax	Fax
Phone	Phone
Number of pages including this sheet	Date
	Time

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DIV. OF OIL, GAS & MINING

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